

Student Signature

Little Traverse Bay Bands of Odawa Indians Michelle Chingwa Education Honorarium (MCEH) Appeal Application



Date

According to the Michelle Chingwa Education Honorarium Act, students may appeal decisions made by the Education Department regarding honorarium adjustments, GPA eligibility status and deadline denials. Appeals must be submitted within 15 days of receiving notification of an adjustment or denial. Submissions can be made to the Education Appeals Board via fax (231-242-1411), email (tribalchair@ltbbodawa-nsn.gov) or mail to the following address:

LTBB Tribal Chairperson's Office Attn: Education Appeals Board 7500 Odawa Circle, Harbor Springs, MI, 49744

Incomplete appeal submissions will be deferred until students submit ALL required appeal information. The Education Appeals Board will contact the

student via	phone or email to collect additional inf	ormation. Please provide <u>current</u>	contact information.
Section A: Student Informat	ion		
Name:		Tribal ID #:	
Address:	City:	State:	Zip Code:
Email Address:		Telephone #:	
Section B: Reason For Appea	al		
GPA (Overall GPA is Deadline (Submission Please provide a detailed explanation Section C: Term Relevant to Please check the term that you Winter	are filing an appeal for. Summer Non-standa	andard/non-standard deadline back of this application and attac	
Section D: Method of Attend	Fall dance		
1 · · · · · · · · · · · · · · · · · · ·	You may also waive your right to atte		ur appeal. You may attend your appeal mit a narrative describing your reason
I will attend my appeal	hearing in person	I will attend my appeal heari	ing by conference call.
I waive my right to atte	end my appeal hearing.		
Section E: Certification			
reason(s) that I am appealing and h	ovided on this application is correct and on nave included all supporting documentat ne Education Appeals Board may use who	ion that I would like to be conside	red in my appeal hearing. I have provided
			ormation from my MCEH file for purposes of Department before I officially file my appeal
Furthermore, I understand that if I for filing an appeal.	submit an incomplete appeal applicatior	n, my appeal request will be deferr	red until I provide all necessary information
	submit an incomplete appeal application	n, my appeal request will be deferr	red until I provide all necessary information

Please use the space below to provide a statement regarding your reasoning for filing a MCEH appeal. Attach any supporting documentation if necessary.			